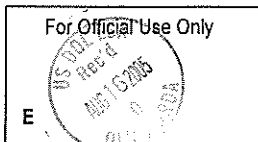


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



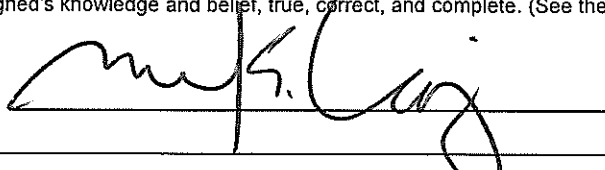
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <b>18331</b>	2. Fiscal Year Covered From: <b>1</b> / <b>1</b> / <b>2004</b> Through: <b>12</b> / <b>31</b> / <b>2004</b>
3. Name and address of person filing. Name <b>MICHAEL J CADDIGAN</b> P.O. Box, Bldg., Room No., if any Street <b>600 West Washington Blvd.</b> City <b>Chicago</b> State <b>Illinois</b> ZIP Code + 4 <b>60661-2940</b>	4. Name, file number, and address of labor organization. Name <b>I.B.E.W. Local #134</b> Labor Organization File Number <b>035-399</b> P.O. Box, Building and Room Number, if any Street <b>600 West Washington Blvd.</b> City <b>Chicago</b> State <b>Illinois</b> ZIP Code + 4 <b>60661-2940</b>
5. Position in labor organization. <b>Business Agent</b>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed 	On <b>8-11-05</b> Date	<b>312-474-4177</b> Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

SEE ADDENDUM

## 8. Name and address of Business (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State  ZIP Code + 4 

## 9. Business deals with:

☐ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State  ZIP Code + 4 

## 11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing. 

## 12.a. Nature of interest held or income received.

12.b. Amount. 

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

SEE ADDENDUM

## 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State  ZIP Code + 4 

## 14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?14.b. Amount of payment.

**FORM LM-30**  
**ADDENDUM PAGE - SECTION B**

**FullName:** MICHAEL J. CADDIGAN

**File Number:** Unknown

**Report Ending Date:** 12/31/2004

8.	N/A	
9.	a. Labor Organization	
10.	Electrical Insurance Trustees	221 North LaSalle Street, Chicago, IL 60601
11a.	Business maintains and administers health and welfare plans for the union's members.	11b. UNKNOWN
12a.	Annual meeting with Electrical Insurance Trustees	12b. UNKNOWN

8.	N/A	
9.	a. Labor Organization	
10.	Odelson & Sterk, Ltd.	3318 West 95th Street, Evergreen Park, IL 6
11a.	Business provides legal services to local union	11b. UNKNOWN
12a.	Dinner meeting to discuss LMRDA election procedures and requirements.	12b. UNKNOWN

8.	N/A	
9.	a. Labor Organization	
10.	Labor Mangement Cooperation Committee of Chicago	Five Westbrook Center, Westchester, IL 60
11a.	Business promotes the electrical industry in Cook County.	11b. UNKNOWN
12a.	All industry annual dinner event.	12b. UNKNOWN

**FORM LM-30**  
**ADDENDUM PAGE - SECTION B**

**FullName:** MICHAEL J. CADDIGAN

**File Number:** Unknown

**Report Ending Date:** 12/31/2004

<b>8.</b>	N/A	
<b>9.</b>	a. Labor Organization	
<b>10.</b>	Electrical Joint Apprentice Training Trust	6201 West 115th Street, Alsip, IL 60803
<b>11a.</b>	Business operates all training programs for the local union	<b>11b.</b> UNKNOWN
<b>12a.</b>	Apprentice graduation dinner event.	<b>12b.</b> \$113.80

<b>8.</b>	N/A	
<b>9.</b>	a. Labor Organization	
<b>10.</b>	Electrical Insurance Trustees	221 North LaSalle Street, Chicago, IL 60601
<b>11a.</b>	Business maintains and administers health and welfare plans for the union's members.	<b>11b.</b> UNKNOWN
<b>12a.</b>	Travel reimbursement for DOL/ERISA required educational conferences.	<b>12b.</b> \$1537.20

<b>8.</b>	N/A	
<b>9.</b>	a. Labor Organization	
<b>10.</b>	Electrical Joint Apprentice Training Trust	6201 West 115th Street, Alsip, IL 60803
<b>11a.</b>	Business operates all training programs for the local union	<b>11b.</b> UNKNOWN
<b>12a.</b>	Travel reimbursement for DOL/ERISA required educational conference.	<b>12b.</b> \$1205.00

**FORM LM-30**  
**ADDENDUM PAGE - SECTION C**

**FullName:** MICHAEL J. CADDIGAN

**File Number:** Unknown

**Report Ending Date:** 12/31/2004

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<b>13a.</b>	Goldberg, Weissman & Cairo
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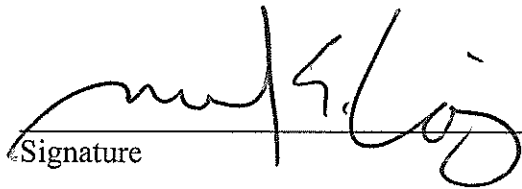
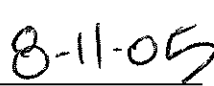
<b>13b.</b>	Consultant
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<b>14a.</b>	Workman's Compensation dinner meeting
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<b>14b.</b>	UNKNOWN
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## DISCLAIMER

The transactions, dealings and interests that are detailed in the attached LM-30 Report represent my good faith effort to reconstruct the reportable occurrences for the period of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will immediately file an amended LM-30 Report.

   
Signature Date